



# General Indemnity Agreement Information Request

**Principal's Name** \_\_\_\_\_

**The following information needs to be provided in the event a General Indemnity Agreement must be prepared. If a third party corporation or partnership is also indemnifying; please photocopy this form and complete, showing the president and corporate secretary or all members of the partnership. If applicable, type name of third party here: \_**

**If Corporation or Partnership - Provide the following (President and Corporate Secretary must be indicated)**

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

**If Proprietorship - Provide the following**

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % Own \_\_\_\_\_

Spouse Name \_\_\_\_\_ Spouse's SS# \_\_\_\_\_

Home Address, Zip \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_